

## Gas Optimization Study Program Application

### Instructions for Use

**All Gas Optimization Studies must receive pre-approval from the program BEFORE the study begins.**

For detailed instructions, please refer to the steps below. If you have any questions, please call 855-849-8928.

#### Step 1: Determine Eligibility

To be eligible, a customer must be a multi-family, commercial or industrial facility that is a Peoples Gas or North Shore Gas customer with Service Classification 2 or higher. Eligibility requirements vary by study type. (Customers with Service Classification 5 are exempt from participating). Eligible customers must meet the eligibility requirements outlined in the eligibility checklist on page 4, 5 or 6 of this application.

#### Step 2: Complete an Application for Pre-Approval

Gas Optimization Studies are limited to an annual budget and are available on a first-come, first-served basis. Customers who submit applications after program funding has been committed will be notified that funding is not available and may resubmit their application when funding becomes available. Required documentation includes:

- a) The completed application with the customer's signature on page 3.
- b) A copy of the customer's Peoples Gas or North Shore Gas utility bill and third-party supply bill, if applicable.

#### Step 3: Site Assessment

Eligible customers will coordinate with the program team to provide access to building systems and answer questions on facility equipment and operations during the multi-day site assessment. On-site activities will not exceed four business days. The program team and the site assessment provider will schedule a report delivery meeting to review the findings and prioritize facility improvements with the customer's representative(s).

#### Step 4: Implementation

Implement no- and low-cost recommendations to fulfill the requirements. Project documentation will be collected for submittal with final application. Additional program rebates may be eligible for work beyond the implementation requirements. The program team will help customers determine additional rebate opportunities.

#### Step 5: Project Completion

Submit the final application with the customer's signature on page 7 to the program team via mail, email or fax. The program team will schedule a final meeting to verify implementation and compliance with program requirements.

Please submit the completed, signed application and required documentation one of three ways:

#### Option 1: Mail

Peoples Gas/North Shore Gas  
Gas Optimization Study Program  
5450 N. Cumberland Ave., Ste. 125  
Chicago, IL 60656

#### Option 2: Scan and Email

Attn: Gas Optimization  
Study Program

For Peoples Gas customers:  
peoplesgas@franklinenergy.com

For North Shore Gas customers:  
northshoregas@franklinenergy.com

#### Option 3: Fax

Attn: Gas Optimization  
Study Program

773-853-2205

## Applicant Information

Customer Account Name:		Contact Name and Title:	
Phone:	Email:		
Installation Address:	City:	State:	ZIP:
Mailing Address:	City:	State:	ZIP:
Is this a 24-hour facility?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Annual Hours of Operation:	Fuel Type for Space Heating: <input type="checkbox"/> Natural Gas <input type="checkbox"/> Electric
Natural Gas Utility:	<input type="checkbox"/> Peoples Gas <input type="checkbox"/> North Shore Gas	Utility Account Number:	
Building Type:	<input type="checkbox"/> Office <input type="checkbox"/> Retail/Service <input type="checkbox"/> Warehouse <input type="checkbox"/> Manufacturing <input type="checkbox"/> Grocery <input type="checkbox"/> Healthcare/Medical <input type="checkbox"/> Non-Profit <input type="checkbox"/> Multi-family <input type="checkbox"/> Religious Facility <input type="checkbox"/> Hotel/Motel <input type="checkbox"/> Restaurant <input type="checkbox"/> College/University <input type="checkbox"/> K-12 School <input type="checkbox"/> Other: _____		
How did you learn about this program?	<input type="checkbox"/> City of Chicago <input type="checkbox"/> Utility <input type="checkbox"/> Advertisement <input type="checkbox"/> Event <input type="checkbox"/> Contractor <input type="checkbox"/> Chicago Retrofit Program <input type="checkbox"/> Mailer or Bill Insert <input type="checkbox"/> Website <input type="checkbox"/> Other: _____		
Is your business classified as any of the following?	<input type="checkbox"/> Women-owned <input type="checkbox"/> Minority-owned <input type="checkbox"/> Veteran-owned		

## Gas Optimization Study Requested

<input type="checkbox"/> Building Heating Optimization <input type="checkbox"/> Steam Plant Optimization <input type="checkbox"/> Process Heating Optimization		
<b>For Program Use Only</b>	Assigned Technical Team	Team Lead

## Service Agreement

**Important:** This Agreement formalizes the commitment between the Peoples Gas and North Shore Gas Energy Efficiency Programs (the "Companies") and the customer (the "Customer"). The Customer acknowledges that the program is accepting risk by providing incentives in the form of engineering fees for Gas Optimization Studies prior to receiving the benefit of natural gas savings that result from implementation of optimization measures. To mitigate the risk, the program requires the Customers to commit to implementation of optimization measures that meet payback criteria up to a maximum amount identified in the Customer liability section below.

## Program Obligation

**The Peoples Gas and North Shore Gas Energy Efficiency Programs agree to:**

- Provide a program team to assist with the implementation and project management of the Gas Optimization Study.
- Provide a technical team to perform studies.
- Provide direct payment to the technical team for engineering fees up to a maximum of \$\_\_\_\_\_.
- Meet established program review and delivery target dates for the project.

## Customer Duties

**The Customer agrees to:**

- Provide the facility access and staff support (estimated not to exceed 20 hours) needed to facilitate the Gas Optimization Study.
- Participate in the project kickoff, findings presentation and close-out meetings.
- Implement all valid optimization measures identified by the Gas Optimization Study that have a payback less than or equal to \_\_\_\_\_ year(s), not to exceed \$\_\_\_\_\_.
- Show significant progress (or complete compliance) with the implementation requirements within 90 days of report presentation.
- Agree to the terms and conditions as indicated on page 8.

## Non-Compliance

Customers who drop out of the program either by becoming non-communicative or failing to implement findings must repay engineering fees paid out by the program for Gas Optimization Study fees up to the amount identified in the program obligation section of this document.

## Certifications and Signatures

By signing this application, I certify, as the building owner or the owner's authorized representative, that I have read and understand the terms and conditions of this agreement and that the information contained within this application is true and factual.

Customer Representative Name and Title	Customer Representative Signature	Date
Program Representative Name	Program Representative Signature	Date

## Building Heating Optimization Application

Building Heating Optimization offers a thorough review of building automation systems and heating equipment in conjunction with a building operator interview, operational review and maintenance survey to identify high-impact, no- and low-cost modifications to existing systems. Facility owners will be required to commit a minimum of \$7,500 toward the implementation of low-cost and/or quick payback measures (less than 18 months) identified by the Gas Optimization Study. Rebates from the Energy Efficiency Programs (prescriptive and/or custom) may be available for measures exceeding the facility implementation commitment.

### Eligibility Checklist

You must check "Yes" to ALL of the following questions in order for your facility to be eligible:	
<input type="checkbox"/> Yes	Do you have at least 75,000 square feet of conditioned area (heated and cooled) in your facility?
<input type="checkbox"/> Yes	Is a majority of the building controlled by a building automation system with direct digital controls?
<input type="checkbox"/> Yes	Is your facility free of major maintenance issues?
<input type="checkbox"/> Yes	Do you intend to operate the current steam systems for the next four years without major upgrades?
<input type="checkbox"/> Yes	Are you willing to commit \$7,500 toward the implementation of low-cost or quick payback measures? (Note: Program guidelines limit required installation to measures with a payback of 18 months or less.)
<input type="checkbox"/> Yes	Are you willing to dedicate staff time (up to 20 hours) to assist with the on-site assessment?

### Facility Information

Total Area	ft <sup>2</sup>	Number of Residents or People in the Building Eight Hours or More Per Day	
Conditioned Area	ft <sup>2</sup>	Number of Full-Time Employees on Maintenance Staff	
Year of Construction		Manufacturer of Building Automation System (BAS)	
Number of Floors		Age of Building Automation System	
Percent Occupied		Annual Hours of Operation	

### HVAC System Details

Plants (check all that apply):	
<input type="checkbox"/> Air Handler Units	<input type="checkbox"/> Cooling Tower
<input type="checkbox"/> Boiler, Electric	<input type="checkbox"/> Rooftop Units
<input type="checkbox"/> Boiler, Natural Gas	<input type="checkbox"/> Unit Heater, Natural Gas
<input type="checkbox"/> Chiller, Absorption	<input type="checkbox"/> Unit Heaters, Electric
<input type="checkbox"/> Chiller, Electric	<input type="checkbox"/> Water Loop Heat Pumps
<input type="checkbox"/> Condenser	<input type="checkbox"/> Other:

Distribution (check all that apply):	
<input type="checkbox"/> Baseboard, Electric	<input type="checkbox"/> Reheat, Electric
<input type="checkbox"/> Baseboard, Hot Water	<input type="checkbox"/> Reheat, Hot Water
<input type="checkbox"/> Chilled Water	<input type="checkbox"/> Steam
<input type="checkbox"/> Constant Volume	<input type="checkbox"/> Variable Air Volume (VAV)
<input type="checkbox"/> Hot Water	<input type="checkbox"/> Other:
<input type="checkbox"/> Radiator, Steam	

### Other Projects

If applicable, please list any projects you would like considered (other appropriate projects are likely to be identified):

## Steam Plant Optimization Application

Steam Plant Optimization offers an evaluation of the central steam system to identify low-cost operational changes and modifications that have high impacts on natural gas savings. Technical Teams review the full steam cycle, from make-up water to condensate return, to identify opportunities for reducing loads or increasing efficiency. Facility owners will be required to commit a minimum of \$10,000 toward the implementation of low-cost and/or quick payback measures (less than one year) identified by the Gas Optimization Study. Rebates from the Energy Efficiency Programs (prescriptive and/or custom) may be available for measures exceeding the facility implementation commitment.

### Eligibility Checklist

You must check "Yes" to ALL of the following questions in order for your system to be eligible:	
<input type="checkbox"/> Yes	Do you have at least 250 boiler horsepower of combined capacity?
<input type="checkbox"/> Yes	Does this facility use at least 500,000 therms of natural gas annually?
<input type="checkbox"/> Yes	Is your steam plant free of major maintenance issues?
<input type="checkbox"/> Yes	Do you intend to operate the current steam systems for the next four years without major upgrades?
<input type="checkbox"/> Yes	Are you willing to commit \$10,000 toward the implementation of low-cost or quick payback measures? (Note: Program guidelines limit required installation to measures with a payback of one year or less.)
<input type="checkbox"/> Yes	Are you willing to dedicate staff time (up to 20 hours) to assist with the on-site assessment?

### Facility Information

Boiler Capacity in Boiler Horsepower	BHP
Boiler Capacity Normally Operating (approximate)	BHP
% of Annual Steam Plant Fuel Usage Met by Natural Gas	
Annual Hours of Operation	
Typical Operating Pressure	

Year of Construction	
Stack Economizer(s) Installed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Blow Down Heat Recovery Installed?	<input type="checkbox"/> Yes <input type="checkbox"/> No

### Steam Plant Details

End Use and Major Process Operations (select all that apply):				
<input type="checkbox"/> Space Heating	<input type="checkbox"/> Drying	<input type="checkbox"/> Domestic Water Heating	<input type="checkbox"/> Sterilization	<input type="checkbox"/> Other:
<input type="checkbox"/> Evaporation	<input type="checkbox"/> Process Heating	<input type="checkbox"/> Chiller, Absorption	<input type="checkbox"/> Distillation	

### Other Projects

If applicable, please list any projects you would like considered (other appropriate projects are likely to be identified):

## Process Heating Optimization Application

The Process Heating Optimization offer covers a wide variety of systems that use natural gas to heat materials as part of a manufacturing process. Technical Teams work with staff to review the process looking at combustion efficiencies, heat containment, material flow and heat recovery to identify large natural gas savings for manufacturing customers. Facility owners will be required to commit a minimum of \$10,000 toward the implementation of low-cost and/or quick payback (less than one year) measures identified by the Gas Optimization Study. Rebates from the Energy Efficiency Programs (prescriptive and/or custom) may be available for measures exceeding the facility implementation commitment.

### Eligibility Checklist

You must check "Yes" to ALL of the following questions in order for your system to be eligible:	
<input type="checkbox"/> Yes	Do you have at least 5 million Btu of process heating capacity?
<input type="checkbox"/> Yes	Does this facility use at least 500,000 therms of natural gas annually?
<input type="checkbox"/> Yes	Do you intend to operate the current process heating systems for the next four years without major upgrades?
<input type="checkbox"/> Yes	Are you willing to commit \$10,000 toward the implementation of low-cost or quick payback measures? (Note: Program guidelines limit required installation to measures with a payback of one year or less.)
<input type="checkbox"/> Yes	Are you willing to dedicate staff time (up to 20 hours) to assist with the on-site assessment?

### Facility Information

Process Heating Capacity in Million Btu	MMBtu	Annual Hours of Operation	
Process Heating Capacity Normally Operating (approximate)	MMBtu	Age of Systems	
% of Annual Process Heating Fuel Usage Met by Natural Gas		Heat Recovery Equipment Installed?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Describe type of production involved:

### Process Heating Details

End Use (check all that apply):		
<input type="checkbox"/> Agglomeration - Sintering	<input type="checkbox"/> Fluid Heating	<input type="checkbox"/> Separating
<input type="checkbox"/> Calcining	<input type="checkbox"/> Heating and Melting	<input type="checkbox"/> Smelting
<input type="checkbox"/> Curing and Forming	<input type="checkbox"/> Heat Treating	<input type="checkbox"/> Other:
<input type="checkbox"/> Drying	<input type="checkbox"/> Incineration/Thermal Oxidation	
<input type="checkbox"/> Forming	<input type="checkbox"/> Metals Reheating	

### Other Projects

If applicable, please list any projects you would like considered (other appropriate projects are likely to be identified):

## Gas Optimization Study Final Application

**Important:** Please read the application and agreement prior to completing this section.

### Project Information

Gas Optimization Study Type:  Building Heating  Steam Plant  Process Heating

You must answer ALL of the following questions:

<b>1</b>		Total savings (therms) for all measures implemented to date
<b>2</b>	\$	Maximum customer obligation for project type
<b>3</b>	\$	Implementation cost for all no-cost and low-cost projects
<b>4</b>	\$	Total implementation cost of all measures implemented to date
If implementation cost (3) did not meet customer obligation (2), please provide justification below.		

### Notice of Project Completion

I verify that I (the "Customer") have completed project implementation within the terms of the agreement. I request the Gas Optimization Study Program to acknowledge that the agreement has been fulfilled and release me from any further commitments to the program or liability for fees associated with services rendered.

### Authorized By

Customer Representative Name and Title	Customer Representative Signature	Date
Program Representative Name	Program Representative Signature	Date

## Terms and Conditions

- Program Offer:** This program is available from January 1, 2018 to December 31, 2018 to eligible Peoples Gas and North Shore Gas customers ("Customers"). Studies must result in reduced natural gas energy use due to an improvement in the system efficiency. Reduced natural gas resulting from fuel switching, power generation, or renewable energy will not qualify. Participating Customers must meet the "Customer" liability requirements as outlined on page 3.
- Eligibility:** Eligible Customers must be a multi-family, commercial or industrial facility that is a Peoples Gas or North Shore Gas (the "Company") customer with Service Classification 2 or higher (Customers with Service Classification 5 are exempt from participating). Eligible Customers must meet the eligibility requirements outlined in the eligibility checklist on page 4, 5 or 6 of this application.
- Delivery:** Applications must be delivered one of three ways:
  - Mailed to: Peoples Gas/North Shore Gas  
Gas Optimization Study Program  
5450 N. Cumberland Ave., Ste. 125  
Chicago, IL 60656
  - Emailed to: [peoplesgas@franklinenergy.com](mailto:peoplesgas@franklinenergy.com) or  
[northshoregas@franklinenergy.com](mailto:northshoregas@franklinenergy.com)
  - Faxed to: 773-853-2205
- Applications:** Applications must have complete information and be submitted with:
  - The completed application with Customer signature on page 3.
  - A copy of the Customer's Peoples Gas or North Shore Gas utility bill and third-party supply bill, if applicable.
- Inspection:** Program staff reserves the right to conduct pre-inspections and post-inspections of proposed and installed projects.
- Tax Information:** Applicant is responsible for contacting a qualified tax advisor to determine tax liability. Peoples Gas or North Shore Gas is not responsible for any tax liability imposed on the Customer as a result of program participation.
- Publicity:** Peoples Gas and North Shore Gas reserve the right to publicize your participation in this program, unless you specifically request otherwise.
- Program Discretion:** The program is available on a first-come, first-served basis. The program is subject to change or termination without notice at the discretion of Peoples Gas and North Shore Gas.
- Logo Use:** Customers or trade allies may not use the Peoples Gas or North Shore Gas program names or logos in any marketing, advertising or promotional material without written permission.
- Disclaimers:** The Customer will defend, hold harmless, and release The Peoples Gas Light and Coke Company and North Shore Gas Company and each company's affiliates, officers, directors, shareholders, agents, employees, contractors, and representatives from any and all claims, liabilities, fines, interest, costs, expenses and damages (including attorneys' fees and court costs) incurred by the Customer or its contractors or any third party for any damage, injury, death, loss, or destruction of any kind to persons or property, to the extent the damage, injury, death, loss, or destruction arises out of or is related to the acts or omissions of Peoples Gas or North Shore Gas or either company's affiliates, officers, directors, shareholders, agents, employees, contractors, or representatives or to the program. Neither Peoples Gas nor North Shore Gas endorses any particular manufacturer, product, labor, or system design by offering these programs.

NEITHER PEOPLES GAS NOR NORTH SHORE GAS EXPRESSLY OR IMPLICITLY WARRANTS THE PERFORMANCE OF ANY EQUIPMENT OR ANY CONTRACTOR'S QUALITY OF WORK. NO WARRANTY OF ANY KIND, WHETHER STATUTORY, WRITTEN, ORAL, OR IMPLIED (INCLUDING WARRANTIES OF FITNESS FOR A PARTICULAR PURPOSE OR MERCHANTABILITY) WILL APPLY. CONTACT YOUR CONTRACTOR OR EQUIPMENT SUPPLIER FOR ANY WARRANTIES.
- Release of Customer Information:** Customer agrees to the release by Peoples Gas or North Shore Gas of any Customer data, including personally identifiable information, to any contractor or other vendor providing services or support under the program.
- Verification:** Any Customer receiving program services may be contacted by an evaluator to verify service/equipment installation or be asked to complete a Customer survey.